

August 14, 2008

ATTN: Medical Health Officers and Branch Offices

Public Health Nursing Administrators and Assistant Administrators

Holders of Communicable Disease Control Manuals

Re: Communicable Disease Control Manual – Chapter 1, Management of Specific Diseases, Hepatitis A Guidelines

Please note the following revisions to the CDC Manual – Hepatitis A:

Page 1, 1.1 Goal:

"Increasing public awareness of the use of hepatitis A vaccine prior to travel" is added to the list of initiatives to reduce the annual incidence of hepatitis A virus infection. A significant proportion of cases of hepatitis A are identified in persons who were not immunized prior to travel to countries where hepatitis A is endemic. Data entry to iPHIS regarding travel exposure is noted on page 9, under "Reporting."

Page 2, 3.0 Epidemiology:

• This section has been updated with the number of cases and the rate of hepatitis A infection in BC for 2007.

Page 2, 4.0 Definitions:

- Definitions for "confirmed" and "probable" cases are updated to be consistent with national case definitions. The confirmed case definition includes laboratory confirmation (detection of IgM antibody to hepatic A virus) in the absence of recent vaccination, AND acute illness OR an epidemiologic link to a person with laboratory confirmed hepatitis A. A "probable" case is defined as "acute illness in a person who is epidemiologically linked to a confirmed case."
- New section added on the indications for and limitations of laboratory testing.
 BCCDC verifies all HAV-IgM reactive specimens with a second testing method.
 Health Authorities are reminded that local laboratories should send specimens to BCCDC, indicating they are acute hepatitis A.
- Definition of acute clinical illness is added to this section.

Page 3, 5.0 Case Investigation and 5.2 Obtain Case Details:

Information in these sections has been reordered for clarity. The hepatitis A
Follow-up Form is added to the guidelines (Appendix A) and may be used to
collect case information.

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Information regarding blood donation in the year previous to the acute hepatitis
A infection has been added to this section, on Page 4. If there has been blood
donation, follow the protocol as outlined in the CDC manual, Transfusion
Transmissible Infections.

Page 4, 6.2 Exclusion of cases:

 A third bullet has been added in this section. In addition to exclusion of cases involving the handling of food or milk, and the consideration of exclusion of children and staff from child care facilities, the Medical Health Officer may consider exclusion of health care workers from a work site, when the nature of their health care work poses a risk for HAV transmission.

Page 5, Contact Management:

Graphic added to illustrate the "period of infectivity" for a case of acute hepatitis
 A. This will assist in identification of contacts.

Page 6, 7.2 Immunoprophylaxis for contacts:

 Post – vaccination testing is not recommended. This recommendation is applicable to individuals with HCV infection since a literature review concluded that individuals with HCV respond well to vaccine.

Page 8, 7.4 Exclusion of contacts:

 Additional information added in this section regarding a decision to exclude contacts of a case from food or milk handling duties. This information is comes as a result of discussion with the BC Enteric Policy working group.

Page 9, 10.0 Reporting:

 Directions provided for recording travel exposure when a case of acute Hepatitis A is entered in iPHIS. This information is required in order to assess the number and proportion of HAV infections associated with travel outside of BC.

Page 10, 12.0 References:

Reference list has been updated.

Appendix A: Hepatitis A Follow-Up Form:

 The form has been appended to the hepatitis A guidelines to facilitate collection of information when interviewing a client for case details and contact identification. Pages are numbered 1 – 5.



Please remove and destroy the following pages from the CDC Manual, Chapter 1, Management of Specific Diseases, Hepatitis A:

TOC and pages 1 - 9

Dated June, 2005

Please insert the following pages in the CDC Manual, Chapter 1, Management of Specific Diseases, Hepatitis A:

TOC and pages 1-10 Appendix A pages 1 – 5

Dated August 2008

If you have any questions or concerns, please contact Dr. Jane Buxton, or Cheryl McIntyre, Associate Nurse Epidemiologist, at telephone (604)660-6061, fax (604)660-0197 or by email at jane.buxton@bccdc.ca or cheryl.mcintyre@bccdc.ca.

Sincerely,

Dr. Jane Buxton

Physician Epidemiologist

Epidemiology Services

BC Centre for Disease Control



pc: Dr Perry Kendall

Provincial Health Officer Ministry of Health Services

Dr. Bob Fisk Craig Thompson

Medical Consultant Manager, CD Prevention --Immunization

Dr. Eric Young

Deputy Provincial Health Officer

Ministry of Health Services

Non-Communicable Disease Ministry of Health Services Ministry of Health Services

Warren O'Briain Executive Director Comm Disease and Addiction Prevention Ministry of Health Services